

## **CERTIFICATION FORM**

**The following text shall be included on the front cover of the County Highway and Bridge Improvement Plan:**

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Certification: As approved this \_\_\_\_ day of \_\_\_\_\_, 202\_\_  
\_\_\_\_\_ County Commission

By: \_\_\_\_\_  
County Commission Chairperson

Attest:

\_\_\_\_\_  
County Auditor or Clerk

County Contact Person: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Email Address: \_\_\_\_\_

Received by SDDOT on \_\_\_\_\_  
Approved by SDDOT on \_\_\_\_\_

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